FOR INSTRUCTIONS, SEE BACK OF FORM			FORM	
DISCLOSURE SUMMARY PAG			DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Orga	nization)		(Rev. 07/2003)	REPORT
Behn for Senate	. 2000		For Office Use Of Comm. #	46 99
		-	Logged In	Y 900
IMPORTANT: Indicate type of committee you are reporting for:			Scanned	<b>1</b> 93
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City (	( 4 )County/Local Candidate Central Committee		Computer	<u> </u>
CANDIDATE COMMITTEES ONLY:		<u> </u>	Audited	5 7
Candidate Name	Political Party			5
Jerry Behn	Republican			9
Office Sought	District (if Senate or House	)		
Beste Senate Seat	24			
N. C.				
Montaline of Buce	<u>515-676-257</u>	5		Jan 12, 2008
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		DATE S	IGNED
Late filed reports are subject to	possible civil and cri	iminal	penalties.	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE			•	
	REPORT FOR AN/A (1) EL		/(2)NON-ELECT	ION YEAR
(report date)	Indicate one 2		/(=)::0::	NOW TEXAN.
CHECK IF AMENDMENT TO REPORT DATED	-	Local C	ommittees, enter D	ate of Election
			ommudes, enter D	ate of Liection
Check if this is final (termination) report and attach Notice of	Dissolution Form DR-3.		& Local Committee	s, enter County in
(You must continue to file reports until a Notice of Diss	olution is filed.)	which E	lection is held	
STATEMENT	OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (This by the committee. This amount MUST be the same as	s is the total of all monies held the cash on hand at the end	t		
of the last reporting period, or must be zero if this is fire	st report filed.)	\$	27,193	.25
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedule	· · · · · · · · · · · · · · · · · · ·	•		
Schedule F: Loans Received total (Attach Schedule F				
Schedule H: Total Sales of Campaign Property (Attack		•••••	***	· · · · · · · · · · · · · · · · · · ·
(Schedule H applies to Candidates' Comm			05.040	0.4
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	S0B-101	FAL \$	35,046	.34
Schedule B: Expenditures total (Attach Schedule B) (*	*=	. 1	921	.33
Schedule F: Loan Repayments total (Attach Schedule		•		
CASH ON HAND at the end of this reporting period (if final repo	•	•••••		
be zero) (Attach DR-3)	rt, balance must	<b>S</b>	34,125	.01
**UNPAID BILLS (From Schedule D - Attach Schedule D)				
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedu				
**OUTSTANDING LOANS (From Schedule F - Attach Schedule	F)	\$		
CANDIDATE COMMITTEES ONLY:				
CONSULTANT BREAKDOWN (Schedule G Attached?)	. 🛦		YE	s <u> </u>
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac	n Schedule H)	\$		

## For instructions, See Back of Form

## CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Behn for Senate

CHE	CK THIS BOY	
SCHEDULE A (Rev. 07/03)	MCVE FO	

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5/29/07	<b>1D#</b> 6027 <b>CK#</b> 2579	Deere Pac Iowa 666 Grand Ave. Suite 1707 Des Moines, Iowa 50309		\$ 500.00	
5/29/07	iD# 984 ск# 7136	Citigroup Inc. 1101 Pennsylvania, NW Suite 1000 Washington, D.C. 20004		250.00	
8/15/07	ID#C00199703 CK# 13404	GlaxoSmithKline Five Moore Drive Research Triangle Park NC 27709		250.00	
9/14/07	iD# <sub>6067</sub> cK# 3732	Iowa Health PAC 6750 Westown Parkway #100 West Des Moines, Iowa 50266		200.00	
9/14/07	ID#	Maureen Cahill 815 59th St. West Des Moines, Iowa 50266		20.00	
9/14/07	ID# CK#	Gail Olson 532 6th St. Apt. B Boone, Iowa 50036		25.00	
9/14/07	ID# CK#	Kenton Schultz 2386 Sportsman Club Lane Adel, Iowa 50003		50.00	
10/25/07	ID# 6098 CK# 3552	Iowa BEV PAC 321 E. Walnut Suite 310 Des Moines, Iowa 50309		500.00	
12/4/07	9474 <b>CK#</b> 9156	Allstate Ins. 2775 Sanders Road, Suite A% Northbrook, IL 60062	-	200.00	
12/13/07	1D# 6063 CK# 2153	Iowa Dental Assn. 5530 West Parkway Suite 100 Johnston, Iowa 50131		1000.00	
			SUB-TOTAL	\$ 2995.00	<del></del>

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3 (for Schedule A)

TOTAL (if last page of this schedule)

### For Instructions, See Back of Form

## CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)

<u> 18 18 18 18 18</u>	<u> </u>			
COMMITT	FEE NA	ME (M	ust be same as on Statement of Organization)	
	Behn	for	Senate	

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Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
12/13/07	ID#	Michael Medved 6600 Westown Parkway West Des Moines, Iowa 50266		\$ 250.00	
12/13/07	ID# CK#	James Myers 6600 Westown Parkway West Des Moines, Iowa 50266	Walter and the same space of the same	250.00	73.55 1
12/13/07	iD# 6160 ck# 2301	Iowa Independent Bankers 1603 22nd St. Suite 102 West Des Moines, Iowa 50266	And the state of t	250.00	
12/19/07	iD# 984 ck# 2009	AQUILA Inc 20 W 9th St. 2nd Floor Kansas City, MO 64105		300.00	
12/19/07	ю# 6033 ск# <sup>1120</sup>	EMC CO 717 Mulberry St Des Moines, Iowa 50309		200.00	
12/19/07	ID# 6059 ск# 3122	Iowa Committee of Automotive Reta 1111 Office Park Rd. West Des Moines, Iowa 50266	ilers	200.00	
12/19/07	iD# 6052 ск# 3195	Independent Insurance Agents of I 4000 Westown Parkway Suite 200 West Des Moines, Iowa 50266	A	250.00	
12/19/07	iD# 6004 CK# 4666	Associated General Contractors of 701 E. Court Ave. Des Moines, Iowa 50309	IA	500.00	
12/19/07	ID# 984 Ск# 1680	WellPac 636 Grand Ave. Station 13 Des Moines, Iowa 50309	-	250.00	
12/19/07	ID# 6155 CK# 4566	Iowans for Tax Relief P.O. Box 209 Muscatine Iowa 52761		500.00	
-				\$ 2950.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 3 (for Schedule A)

\$

#### For instructions, See Back of Form

#### **CONTRIBUTIONS - MONEY TAKEN IN**

(microsing candidate's personal runds)						
COMMITTEE NAME (Must be same as on Statement of Organization)						
Behn for Senate						

	CK THIS BC : T
SCHEDULE A (Rev. 07/03)	MONETHAN RECEPTS

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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
12/19/07	1D# 6118 CK# 2497	Iowa Optometric Assn 1454 30th St. STE 204 West Des Moines, Iowa 50166	THE SECOND STATE OF THE SE	\$ 250.00	
12/19/07	ID# CK#	Hultman Company 1200 57th St. West Des Moines, Iowa 50266	Control of the Contro	100.00	
12/19/07	6486 CK# 1689	Iowa Telecom 115 S. 2nd Ave. W Newton, Iowa 50208	The state of the s	200.00	
12/19/07	ю# 6969 <b>ск#</b>	Iowa Industry PAC 904 Walnut, Suite 100 Des Moines, Iowa 50309		100.00	
12/28/07	ID# 6101 ск# 3749	Truck PAC of Iowa P.O. Box 6121 East D.M. Station Des Moines, Iowa 50309		500.00	
12/28/07	ID# 6430 ск# 1548	Iowa Rural Water State PAC 4221 S. 22nd. Ave. E Newton, Iowa 50208		200.00	
12/31/07	ID# CK#	Raccoon Valley Bank 1202 2nd St. Perry, Iowa 50220		58.29	
3/16/07	ID#	A. David Davis 8125 Brill Rd. Cincinnati. OH 45243		500.00	
	CK#		-		
	ID# CK#				
			SUB-TOTAL		

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of (for Schedule A)

\$1908.09

D	377
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CONTRACTOR CONTRACTOR	

# EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

Behn for Senate

DATE EXPENDED (MM/DD/YR)	( / -	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/12/07	ID# CK#	Boone Area Chamber of Commerce 903 Story St. Boone, Iowa 50036	1 yr. membership	<b>\$</b> 110.00
1/12/07	ID#	Boone News Republican P.O. Box 100 Boone, Iowa 50036	1 yr. subscription	110.00
/12/07	ID# CK#	Bouton Post Office 110 E. 1st. St Bouton, Iowa 50039	postage on ethics report	5.36
9/8/07	ID# CK#	Dallas County News 705 Main St. Adel, Iowa 50003	1 year Subscription	31.75
12/20/07	ID# CK#	Dennise Behn 1313 Quill Boone, Iow <b>æ</b> 50036	Parade candy and walkers food (Summer Campaign expenses)	51 <b>§</b> .7.2
12/20/07	ID# CK#	Perry Chief P.O. Box 98 Perry, Iowa 50220	I year Subscription	33.00
12/31/07	ID# CK#	Boone New Republican P.O. Box 100 Boone, Iowa 50036	1 Year Subscription	445.50
	ID# CK#			115.50

SUB-TOTAL S TOTAL (if last page of this schedule)

921.33

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page 1 of 1	
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